



COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
COMMUNITY PARTNERS
MY HEALTH LA
138% FEDERAL POVERTY LEVEL

(Effective April 1, 2023 through March 31, 2024)

FAMILY MEMBERS LIVING IN THE HOME ¹	TOTAL MONTHLY INCOME MAXIMUM
<input type="checkbox"/> 1	at or below \$1,677
<input type="checkbox"/> 2	at or below \$2,269
<input type="checkbox"/> 3	at or below \$2,860
<input type="checkbox"/> 4	at or below \$3,450
<input type="checkbox"/> 5	at or below \$4,043
<input type="checkbox"/> 6	at or below \$4,633
<input type="checkbox"/> 7	at or below \$5,224
<input type="checkbox"/> 8	at or below \$5,816
<input type="checkbox"/> 9	at or below \$6,406
<input type="checkbox"/> 10	at or below \$6,997
<input type="checkbox"/> 11	at or below \$7,589
<input type="checkbox"/> 12	at or below \$8,180

More than 12 Members

For each additional member, add \$593

¹ Include unborn in family size.
